

**Statement of Organization****Candidates, Political Action or Ballot Question Committees****State of South Dakota**

State law requires statewide and legislative candidate committees, political action committees (PAC) and ballot question committees to register with the Secretary of State. Candidate committees must register within fifteen days after becoming a candidate. Candidate committees that have not already filed a statement of organization, PACs and ballot question committees must register not later than fifteen days after the date upon which the committee made contributions, received contributions or paid expenses in excess of five hundred dollars unless such activity falls within thirty days of any statewide election in which case the statement of organization shall be filed within forty-eight hours.

Full Name of Committee: SOUTH DAKOTA EYE PACStreet Address: 6601 S. MINNESOTA AVE Ste 200 SIOUX FALLS SD 57108

Postal Address: _____

Name of Chair: DAVID R. WEST MD / TREASURERChair Daytime Telephone Number: 605-336-6294

Street Address: _____

Postal Address: _____

Name of Treasurer: DAVID R. WEST MDTreasurer Daytime Telephone Number: 605-336-6294Street Address: 6601 S. MINNESOTA AVE Ste 200 SIOUX FALLS SD 57108

Postal Address: _____

You must list the name, street address, postal address and telephone number of each financial institution where an account or depository is maintained.

Name of Financial Institution	Street and Postal Address	Telephone Number
US BANK	141 N. MAIN AVE SIOUX FALLS SD 57104	605-339-8600

If you are a political action committee or a ballot question committee, you must include a concise statement of your purpose and goals.

Filed this 12th day ofJuly 07
Chris Nelson
SECRETARY OF STATE

Statement of Purpose and Goals:

AN ORGANIZATION OF MEDICAL EYE DOCTORS (OPHTHALMOLOGISTS) WHO STRIVE FOR THE
BEST AND SAFEST EYE CARE TO BE PROVIDED TO THE CITIZENS OF SOUTH DAKOTA.

If you are a political action committee or a ballot question committee, you must list the full name, street address, and postal address of the organization with which the committee is connected or affiliated, or if the committee is not connected or affiliated with any one organization, the trade, profession, or primary interest of the committee.

Name of Organization: SOUTH DAKOTA ACADEMY OF OPHTHALMOLOGY

Street and Postal Address: PO BOX 803 HELENA, MT 59624

Trade, profession, or primary interest of the committee: OPHTHALMOLOGY (MEDICAL AND SURGICAL EYE CARE)

☐ Check here if your committee is incorporated under federal or state laws for liability purposes only.

The following verification must be completed before submitting statement.

VERIFICATION OF PERSONS MAKING REPORT

We SOUTH DAKOTA EYE PAC + DAVID WEST MD (print both names legibly), certify that we have examined this statement and to the best of our knowledge and belief it is true, correct and complete. We also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer responsible for filing to a civil penalty of fifty dollars per day for each day that the statement remains delinquent.

Date: _____

Signature of candidate or chair

Date: 7/16/07

David West MD

Signature of treasurer

The candidate or treasurer of a political committee shall file an updated statement of organization not later than fifteen days after any change in the information contained on the most recently filed statement of organization.

Submit Statement of Organization to:
 Secretary of State, Elections Department
 500 East Capitol Ave., Ste 204
 Pierre, SD 57501

or fax to 605-773-6580 or email to kea.warne@state.sd.us

Fax and email images must contain the signature(s) and the original must be filed in our office within one week following the date the fax/email was received.

County, municipal and school candidates file with the person in charge of the local election.

New 7-1-07